

Revised Effective June 29, 2007

Office of the Governor Perry A. Gibson, Executive Director

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Form A Registration for Certification of Conditional Eligibility

1.	Production I	nformation:	
	a)	Name of Production Company _	
	b)	Director	
	c)	Producer(s)	
	d)	Executive Producer(s)	
	e)	Type of Production (e.g. feature, s	short film, documentary, TV pilot, series, etc.)
	f)	Production Title	
2.	Production (Company Headquarters Information	1:
	a)	Name	
	b)	Address	
		_	
	c)	Phone	
	d)	Fax	
	e)	Website Address	
	f)	Contact Name/Title	
	g)	Contact Phone, Cell & Email	
	h)	Type of entity (e.g. "C" or "S" Co	rporation, LLC, Partnership, Trust, etc.)
	i)	State in which Incorporated or Reg	gistered
	j)	Federal Tax I.D. Number (FEIN)	

3.	Production Company Tennessee Information:					
	a)	Name (if different)				
	b)	Address				
	c)	Phone				
	d)	Fax				
	e)	Local Contact Name/Title				
	f)	Local Contact Phone, Cell & En	nail			
	a)	Type of Entity				
	g) h)	State in which Incorporated or R	agistared			
	i)	Federal Tax ID Number (FEIN)				
	1)	rederal Tax ID Nulliber (FEIN)				
4	Type of 13	/15/17% Incentive production inte	nds to apply for			
¬.		*	e of Tennessee, and qualified production costs			
			will equal or exceed \$500,000, 13% of such costs.			
			nessee, and qualified production costs expended in exceed \$200,000, 13% of such costs.			
	Additional	1 2% for at least ¼ of cast and/or c	rew being Tennessee residents.			
	Additional 2% of total qualified production costs expended in Tennessee if production company spends at least \$20,000 for music created by Tennessee residents or for recording music in Tennessee. Refund has a "cap" of \$100,000.					
5. <u>l</u>	Headquarter	rs Incentive production intends to	apply for:			
	Production company is headquartered in Tennessee and will incurr at least \$1,000,000 in qualified expenses producing a theatrical film in Tennessee. Applicant will register with the Department of Revenue and will apply for both incentives.					
	Qualified investor is headquartered in Tennessee and invested in a production company that shall incur at least \$1,000,000 in qualified expenses producing a theatrical film in Tennessee. Applicant will register with the Department of Revenue and will apply for both incentives.					
6.	Production	Costs and Tennessee Production I	nformation:			
	a)	Preliminary budget \$				
	b)	Estimated TN expenditures: \$_				
	c)	_	esidents will comprise% of total cast and			
		-	of combined cast/crew). (25% cast and/or crew is			
		defined as crew that makes the f	inal crew list and does not include dayplayers.)			

	Period	Dates	No. of Days			
Pre-production Production						
Post	Production					
6.	To extent known, p of distributor(s):	ease provide detailed current plans for distrib	ution, including name(s)			
7.	Prior to production, submit a copy of your insurance policy for production, including agent, insurance company(s) and policy amounts.					
8.	•	led information as to what assurances State of the production will be available (e.g. completion).				
9.	b) Script an	preliminary budget.	ector, cast, etc.).			
10.	Send completed app Tenne	ssion				
		vided in this application is true and correct, and I nessee by filing a knowingly false or fraudulent clo	am aware that any applicant that			
incenti see for other p	reimbursement of all mor enalties imposed pursuar	ies received. Reimbursement of such monies shal t to Title 39 of the Tennessee Code. I understand rebate or that rebate funds will be available.	aim shall be liable to the State of I be in addition to payment of a fin			
incenti see for other p	reimbursement of all mor enalties imposed pursuar	t to Title 39 of the Tennessee Code. I understand	aim shall be liable to the State of le be in addition to payment of a fin that submission of an application			
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Date